PTOISB06 (08-03)
Approved for use through 7/31/2006, CMB 0531-0032
Identify OBER U.S. DEPARTMENT OF CONNERCE

Under the Perpension Reduction Act of 1995, no persons are required to respond to a collection of information unless a displays a valid CMB control member.											
PATENT APPLICATION FEE DETERMINATION RECORD Accordance or Docket Named 09 839 147											
CLAIMS AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY											
			apoure S)	SMALL	ENTITY	OR 1	SMALL	EVITTY			
FOR NUMBER FILED BASIC FEE			NUMB	ER EXTRA	RATE	FEE		RATE	FEE		
GT GTA LIN(a)) TOTAL CLAIMS							! <u></u>	OR		00.00	
P 7	OFR LIS(c)	38	retrus 20 * · S		}	x s•	<u> </u>	OR	. 818 x	144.00	
	EPENDENT CLAS CFR 1.18(b))	3	esinus 3 • · · · · · · · · · · · · · · · · · ·)	x 1•		OR	x 3 •		
MILITIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(4))						+50		OR	-5		
" If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL		OR	TOTAL	954.00	
CLAIMS AS AMENDED - PART II											
	(Column 1) (Column 2) (Column			(Calumn 3)	SMALL	ENTITY	OR		R THAN ENTITY		
A		CLAIMS REMAINING		HIGHEST NUMBER	PRESENT	RATE	ADDI		RATE	ADD)-	
ENT		AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA		TIONAL FEE			TIONAL FEE	
AMENDM	Total (27 CFR 1,144-2)	35	Minus	"28	. 7	x s•		QR.	. 812x	المعك	
A S	Independent (DF CFR 1.18(N))	• 4	Miras	<u>" 3</u>	4	× *		OR	x s 🗶 .	X.92	
¥	FRST PRESENTATION OF MULTIPLE DEPOSIDENT CLAIM (37 CFR 1,18(4))					+5		OR	+5=		
						TOTAL ADD'S FEE		OR	TOTAL ADD'L FEE		
سر	1905	(Catumn 1)	•	(Column 2)	(Column 3)						
1		CLAIMS		HIGHEST				1 1			
T B		REMAINING AFTER	1 1	NUMBER PREVIOUSLY	PRESENT EXTRA	RATE.	ADDI+ TIONAL		RATE	ADD1	
Z		AMENDMENT	Ll	PAID FOR	LA.I.C.		FEE			TEONAL /	
Ž	Total CB CFR 1.16(C)	35	Minus	<i>"35</i>	. Ø.	× \$ =		OR	xs `•		
AMENDMENT	CD Chill Frieid. Supebengeut	. 4	Minus	J		x 3 -		OR	x 3 •		
Ş	FRST FRESENTATION OF MALTIPLE DEPENDENT CLAM (2) CFR 1.18(0)					+, .		OR .	+; .		
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
~	-26.05	(Column 1)			~~~~~		<u> </u>	AUC FEE	' 		
-	0-00	(COLUMN 1)	- 61	(Column 2) HIGHEST	(Calumn 3)			1			
TC		REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
S	*	AMENDMENT	 	PAD FOR		1	FEE			FEE	
ENOMENT	Total (37 CFE 1,16(c))	35	Minus	<u> 35</u>		x 8•		OR	x \$50 -	\setminus	
AEN	trdependent pr cr a 1,4600	.4	Minus	<u>" </u>	\cdot	x 5 •		OR	x 8 <u>200</u> =	$A \setminus A$	
4	FIRST FRESENTATION OF MALTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					.+5		0R	+ 5	X	
TOTAL ADD'L FEE OR ADD'L FEE											
	* If the entry in column 1 is less then the entry in column 2, write "0" in column 3.										
	" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, order "20". "" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".										
•	" If the "Highest i	fumber Previously	Paid For	IN THIS SPACE	s less than J. er	ter "3".				. 1	

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiatily is governed by 33 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 results to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any commonts on the emount of time you require to complete URs form and/or suggestions for reducing this burdon, should be sent to the Chief information Officar, U.S. Patent and Trademan Office, U.S. Department of Commerce, P.O. Box 1450, Abszendria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Gox 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, and 1-800-PTO-9199 and select option 2.